

Crowle & Ealand Town Council

Interment Application Form

Title, Christian Name(s) and Surname of deceased			
Address			
Postcode			
Occupation of the deceased			
Age of the deceased Plus D.O.B			
Address where the death occurred			
Postcode			
Date of death (day/month/year)			
Day, Date and Time of Funeral and approx time of interment at the Cemetery			
Religion and Name of Minister			
Has an existing Grave or plot been pre-purchased (Grant of Exclusive Right of Burial) If yes please attach a copy of the grant	Yes		No
Plot Reference Number			
<u>Details of person responsible for funeral</u>			
Name			
Address:			
Post Code:			
Telephone number:			
Email:			
Is Exclusive Right required	Yes		No
If Yes Name of Purchaser			
Address of Purchaser			
Postcode			
Relationship of purchaser to the deceased			
Does purchaser have sole authority for these arrangements	Yes		No
	If no who else has authority?		
<u>Funeral Directors</u>			
Name:			
Address:			
Telephone Number			
Date:			
Please contact the office to book an appointment with the Burials Officer: Emma Von Sembach Cemetery Manager The Chapels, Crowle Cemetery, Mill Road, Crowle, DN17 4LN Tel: 01724 710020 Mobile: 07871404610 email: rfo@crowleandelandcouncil.org			